

or on a young subject, this instrument can be made very useful for extracting.

Gentlemen present at the operations—A. G. DE CAMP, Surgeon U. S. Army; IRA A. SMITH, M. D.; Dr. P. MAXWELL, U. S. Army; RICHARD CLARK, M. D.

Watertown, Jefferson Co. State of N. York, Feb. 13th, 1832.

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ART. IV. *Case of Hernia with Obstruction, (engouement,) in which there was no Evacuation from the Bowels for Seventeen days. By JOHN J. ABERNETHY, M. D. of Harford County.*

I WAS called August 3d, 1832, to visit David Crane of East Windsor, twelve miles from this city, with irreducible, obstructed, inguinal hernia.

The patient was eighty-four years of age, of temperate habits, and good constitution. It appeared that he had had hernia for many years; it had caused no inconvenience; he had never worn a truss. The intestine had usually descended a number of times every day, but he never found any difficulty in reducing it until Friday, July 20th, 1832, when, after labouring some time during the afternoon, he found the herniary tumour in the left groin about the size of a goose-egg, stretching down into the scrotum, causing some pain and general uneasiness.

He immediately resorted to the manipulations by which he had always previously succeeded in reducing it, but at this time found the herniary tumour was larger than it had formerly been, and as he continued his efforts at reduction, they caused considerable pain. He now sent for his physician, who administered a tobacco injection, and again had recourse to the taxis, but in vain; he then directed cold and afterwards warm applications to be made to the part.

Sunday 22d. Gave half an ounce of castor oil, which produced nausea, some tumefaction and tension of the abdomen, but no cathartic operation. After the exhibition of the oil he experienced some pain and tenderness in the herniary tumour; all medical treatment was then suspended, and the last mentioned symptoms disappeared. His diet consisted of chicken broth and beef tea, which were also administered from time to time per anum.

I visited him Friday, August 3d; found him tolerably comfortable, in no pain, had no tenderness or particular tension of the abdomen,

yet some fulness of the bowels, having had no evacuation of faecal matter since the descent of the hernia, July 20th. The hernia could not be reduced at this time; there had been but slight symptoms of inflammation, and none of gangrene. Flatus occasionally passed off from the bowels, and by pressure air could be made to pass out and into the portion of intestine contained in the hernial sac; but the passage of the faeces was entirely interrupted.

I now recommended an immediate operation, which however was not consented to, some of the friends objecting, and the attending physician being absent. Visited the patient again on the afternoon of Sunday, the 5th, when there having been no material alteration in the case, he consented to have it performed.

I was assisted by Dr. E. F. REED in the operation, which was performed in the usual way. Upon opening the sac, it was found to contain a portion of the colon, which exhibited a healthy appearance; adhesions of considerable firmness had formed between the intestine and the sac: on enlarging the opening at the external ring, and separating the adhesions as far as necessary, the hernia was at once reduced. The incision was brought together by three sutures, straps of adhesive plaster, lint, light compresses, and a T-bandage were applied; the patient put to bed; sixty drops of laudanum were immediately given, and in an hour and a half a pill containing one grain of opium. He bore the operation well, complained of but little pain after it was completed, and passed a comfortable night.

Injections of infus. eupator. perfoliat. mur. soda, and molasses, were directed to be given every three hours during the evening and night. Monday morning 6 o'clock gave half an ounce of castor oil, and about 7, he had a natural and copious evacuation from the bowels; this being the first stool he had had for at least *seventeen days*, afforded him much relief.

I then left him doing well; and have since received the following communication from the physician who attended him, dated East Windsor, Sept. 4th, 1832.

SIR—In regard to the case of Mr. Crane, I have nothing particularly interesting to communicate, except the fact of his recovery without any unfavourable occurrence subsequent to the operation.

He remained very feeble during the first week, sleeping most of the time; the pulse extremely small and frequent; the countenance pale and sunken; the tongue densely coated with fur, and the fauces filled with thrush.

His treatment consisted in giving opium in small doses, every four or six hours. Spirit every hour or half hour, sufficiently freely to keep him warm, as he was much inclined to coldness. A solution of quinine was exhibited in

doses equal to one-third of a grain every two hours. Animal broths, custards, coffee, &c. were given hourly, in such quantities as he could be induced to take them.

Alvine evacuations were produced by enemata about once in three days. About a week after the operation, the tongue became clean, the fauces were relieved of their thrush, his breathing, which had been irregular, and accompanied with much rustling, became natural, and the mind, which had during the first week been almost entirely broken down, seemed to recover its strength in some measure.

The wound, which had exhibited rather a pale aspect, otherwise healthy, now seemed to heal rapidly; this, of course, was treated with simple dressings. After this, his treatment remained essentially the same, except that the tonics, cordials, and nourishment, were given less frequently, and in larger doses. The anodynes were dispensed with, except at night.

On the 22d of August the wound appeared perfectly healed; and on the 28th I saw him walking about his room.

Yours, &c.

A. WATSON.

It is well known that the great danger to be apprehended from the incarceration of a portion of intestine or other internal part, is inflammation and its consequences. The *obstruction* to the faecal passage is quite a subordinate consideration, excepting as it may increase the inflammation, as is here clearly demonstrated.

Hartford Co. Sept. 21st, 1832.

ART. V. *An Account of the Influenza of 1831-2, as it occurred in Burke County, Georgia.* By A. C. BALDWIN, M. D.

THE influenza as it appeared within the sphere of my practice, during the winter of 1831-2, and in the spring ensuing, presented a variety of symptoms, in different persons. This difference may have arisen, and probably did arise from the unsettled state of the weather during the time of its prevalence. No winter within my remembrance was more severe, nor do I recollect to have witnessed a spring more remarkable for the great and sudden changes of temperature. Hot, cold, and temperate weather, succeeded each other in such quick succession, that it was almost impossible to conjecture from to day what would be the state of the weather on the morrow. Nor were the changes of temperature alone remarkable. A clear, pleasant, and promising morning was frequently followed by a cold, wet, disagreeable evening. These sudden changes, as might have been expected,